

SERIAL NUMBER 09/096,483 REISSUE		FILING DATE 06/10/98	CLASS 402	GROUP ART UNIT 3722	ATTORNEY DOCKET NO. ADLEAF												
APPLICANT	DAVID C. SCHWARTZ, SOUTHBORO, MA.																
	**CONTINUING DOMESTIC DATA***** VERIFIED THIS APPLN IS A RE OF 08/193,381 02/08/94 PAT 5,524,998 WHICH IS A CIP OF 08/019,645 02/18/93 ABN WHICH IS A CIP OF 07/963,907 10/20/92 ABN																
	**371 (NAT'L STAGE) DATA***** VERIFIED																
ADDRESS	**FOREIGN APPLICATIONS***** VERIFIED																
	FOREIGN FILING LICENSE GRANTED 07/17/98 ***** SMALL ENTITY *****																
	<table border="1"><tr><td>Foreign Priority claimed 35 USC 119 (a-d) conditions met</td><td><input type="checkbox"/> yes <input type="checkbox"/> no</td><td>STATE OR COUNTRY MA</td><td>SHEETS DRAWING 17</td><td>TOTAL CLAIMS 42</td><td>INDEPENDENT CLAIMS 4</td></tr><tr><td>Verified and Acknowledged</td><td>Examiner's Initials</td><td>Initials</td><td></td><td></td><td></td></tr></table>						Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 17	TOTAL CLAIMS 42	INDEPENDENT CLAIMS 4	Verified and Acknowledged	Examiner's Initials	Initials		
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Verified and Acknowledged	Examiner's Initials	Initials															
TITLE	DAVID C SCHWARTZ PO BOX 109 SOUTHBORO MA 01772																
LEAF STRUCTURE WITH A HINGED REPOSITIONAL BINDING																	
FILING FEE RECEIVED \$395		FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit												